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CONFIRMATION NO. 8827

<b>SERIAL NUMBER</b> 10/774,769	<b>FILING OR 371(c) DATE</b> 02/09/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3773	<b>ATTORNEY DOCKET NO.</b> OHM-182A
<b>APPLICANTS</b> Charles E. Dinkler, Cincinnati, OH; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/446,299 02/10/2003 <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/07/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 24
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> C. Richard Eby 2700 Carew Tower 441 Vine Street Cincinnati, OH 45202-2917				
<b>TITLE</b> RADIOLUCENT SKULL CLAMP WITH REMOVABLE PIN LOAD APPLICATOR				
<b>FILING FEE RECEIVED</b> 764	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	